

Legislative Testimony
Public Health Committee
HB 6814 AAC Dental Assistants and Expanded Function Dental Auxiliary
Wednesday, March 11, 2015
Stephen M. Moran, D.D.S.

Senator Gerratana, Representative Ritter and members of the Public Health Committee, my name is Dr. Stephen Moran. I have been practicing dentistry in Connecticut for over 29 years. I am proud and delighted to have volunteered at the Connecticut Mission of Mercy on five occasions. In addition, I am a Husky provider. I wish to testify in favor of House Bill 6814 An Act Concerning Dental Assistants and Expanded Function Dental Auxiliaries.

For the past six months, on a part time basis, I have been helping colleagues in Vermont whom I have known since dental school. Vermont is one of the states that allows EFDAs, and their practice currently employs an EFDA. Thus, I feel that I have a perspective on HB 6814 that most of us here in Connecticut do not. When working with an EFDA, I have been able to be a much more efficient dentist, providing services to a greater number of patients than I would be able to without an EFDA. A typical example would be if I were to prepare a tooth for a filling by removing the decay, the EFDA would then place the filling while I treated another patient in an adjoining room. I would then return and confirm that the filling was placed, polished, and properly conformed to the patient's bite. By doing this, treatment can be rendered in two rooms nearly simultaneously.

Increased efficiency by utilizing an EFDA under the supervision of a dentist could hold promise for those patients who are enrolled in the Husky program. One of the barriers cited to treating this population is that the reimbursement rate is often too low to cover the costs associated with rendering quality treatment. Utilizing an EFDA would lower the cost of providing treatment, and direct supervision by a dentist would ensure that quality standards are met. This has the potential to be an incentive for even more dentists to enroll and join their nearly 2000 colleagues who treat Husky patients.

In addition, by allowing EFDAs the state would employ a proven model currently used by 44 other states and the District of Columbia, very unlike what would be required by the past ADHP bills that have been introduced but not passed.

Thank you for your time; I hope that you will support House Bill 6814.

Respectfully Submitted,

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